## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

P-3458C1.

CLAIMS AS FILED - PART I (Column 1)					(Colur	mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			17					RATE	FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		B#	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			17 minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 0			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zei	ro, ente	r "0" in column 2			TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II								•			OTHER	
		(Column 1)			mn 2)	(Column 3)		SMALL E		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	2.4.	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T.C.LAINA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=.		OR	+280=	
							<b>L</b>	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
	<b>N</b>	(Column 1)		(Colu	ımn 2)	(Column 3)		,DII. I EE			7.0011.122	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		5		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T () A () A	-	┇	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	I CLAIM		<b>」</b>	+140=		OR	+280=	
							<b>L</b>	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
	* * *	(Column 1)		(Colu	ımn 2)	(Column 3)		)UII. FEE	,	•	ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	] [	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	IT OL 4114	=	┨┞	X42=		OR	X84=	
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  Th "Highest Number Previously Paid For" (Total or Independent) is the high st number found in the appropriate box in column 1.											